

# Planning Application



Project Name \_\_\_\_\_

## Applicant or Agent for Applicant

Name GURINDER NAGRA  
 Company STATE FAIR PETRO MART INC  
 Address 8404 W. GREENFIELD AV  
 City WEST ALLIS State WI Zip 53214  
 Daytime Phone Number 414-467-2795  
 E-mail Address GR.NAGRA@gmail.com  
 Fax Number \_\_\_\_\_

## Agent is Representing (Tenant/Owner)

Name GURINDER NAGRA  
 Company STATE FAIR PETRO MART INC  
 Address 8404 W. GREENFIELD AV.  
 City WEST ALLIS State WI Zip 53214  
 Daytime Phone Number 414-467-2795  
 E-mail Address GR.NAGRA@gmail.com  
 Fax Number \_\_\_\_\_

## Property Information

Property Address 8404 W. GREENFIELD AV  
 Tax Key No. 442-0635-000  
 Aldermanic District 3  
 Current Zoning C-2 Neighborhood Commercial  
 Property Owner GURINDER NAGRA  
 Property Owner's Address 6980 South 35th St  
Franklin WI 53212  
 Existing Use of Property AUTO REPAIR SHOP  
 Previous Occupant AUTO REPAIR SHOP  
 Total Project Cost Estimate 1.2 Million

## Application Type and Fee

(Check all that apply)

- ☒ Special Use: (Public Hearing Required) \$525
- ☐ Level 1: Site, Landscaping, Architectural Plan Review \$125  
(Project Cost \$0-\$1,999)
- ☐ Level 2: Site, Landscaping, Architectural Plan Review \$275  
(Project Cost \$2,000-\$4,999)
- ☒ Level 3: Site, Landscaping, Architectural Plan Review \$525  
(Project Cost \$5,000+)
- ☐ Site, Landscaping, Architectural Plan Amendment \$125
- ☐ Extension of Time \$275
- ☐ Sign Plan Review \$125 (Master Sign Plan)
- ☐ Sign Plan Appeal \$125
- ☐ Request for Rezoning \$600 (Public Hearing Required)  
Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_
- ☐ Planned Development District \$1,525 (Public Hearing Required)
- ☐ Subdivision Plats \$1,700
- ☐ Certified Survey Map \$750
- ☐ Certified Survey Map Re-approval \$75
- ☐ Street or Alley Vacation/Dedication \$525
- ☐ Formal Zoning Verification \$225

**In order to be placed on the Plan Commission agenda, the Department of Development MUST receive the following by the last Friday of the month, prior to the month of the Plan Commission meeting. Items can be emailed to [planning@westalliswi.gov](mailto:planning@westalliswi.gov).**

- ☒ Completed Application
- ☒ Corresponding Fees
- ☒ Project Description
- ☐ One (1) set of plans (24" x 36") - check all that apply
  - ☒ Site/Landscaping/Screening Plan
  - ☒ Floor Plans
  - ☒ Elevations
  - ☐ Certified Survey Map
  - ☐ Other
- ☒ One (1) electronic copy of plans
- ☒ Total Project Cost Estimate

**Please make checks payable to:  
City of West Allis**

## FOR OFFICE USE ONLY

Plan Commission April 28, 2021  
 Common Council Introduction May 4, 2021  
 Common Council Public Hearing May 4, 2021

Applicant or Agent Signature GURINDER NAGRA

Date 3-19-21

Property Owner Signature GURINDER NAGRA

Date 3-19-21



user: WALSTJBI Type: DC Drawer: 1  
Date: 3/23/21 01 Receipt no: 17062  
GH DEV SPECIAL USE PERMIT  
1.00 \$225.00  
GURINDER S HADRA  
CK CHECK PAYMEN 2544 \$225.00  
Total tendered \$225.00  
Total payment \$225.00  
Trans date: 3/23/21 Time: 12:13:10

user: WALSTJBI Type: DC Drawer: 1  
Date: 3/23/21 01 Receipt no: 17063  
GH DEV LVL 3 SITE-ARCH PLN R  
1.00 \$225.00  
GURINDER S HADRA  
CK CHECK PAYMEN 2544 \$225.00  
Total tendered \$225.00  
Total payment \$225.00  
Trans date: 3/23/21 Time: 12:14:29